EMPLOYEE

SURVEYS

WARD, DIAGNOSTIC, and SCREENING CONFERENCES

To be left in chart until culled out

by Ward Physician

LABORATORY REPORTS

Name_____ Case No._____

Paste Second Report Here

Paste First Report Here

Laboratory Report sheet kept in Ward Chart until full -- then removed and sent to Medical Records.

MOST RECENT COMPLETE PHYSICAL EXAMINATION

This is to be kept in Chart until a subsequent physical examination is done. In many cases the most recent complete physical will be contained in a Ward Progress or Conference note or Consultation note. In that case this sheet should appear with notation - "for complete physical see Ward Note of (date)".

SUMMARY OF HOSPITALIZATIONS

TO BE KEPT CURRENT When patient returns to ward following a period of hospitalization, date of hospitalization and diagnosis are to be added to this list.

RECORDS OF PACKAGES, MAIL, VISITORS, LEAVES, SPECIAL INCIDENCE, etc., TO BE INCLUDED AT DISCRETION AND IN ORDER SATISFACTORY TO WARD CHARGE BEHIND PROCEDING PAGES.

The following 15 pages, in the order shown, comprise the patient's folder.

PATIENT'S FOLDER

SOCIAL SERVICE

1.0 Social Service is the patients' contact between the institution and the Community.

A. Social Service gathers information concerning the specific problem in the home or the community which leads to the patients' admission.

2.0 The Senior and Junior workers are assigned to special areas of service within the hospital and are part of a Ward Team working to solve some of the patients' problems.

3.0 It is the policy of this hospital to discourage employees taking a patient home for a visit unless there has first been discussion of and the approval of this arrangement with either the ward team or the ward Social Worker.

A. In no event is a male employee permitted to take a female patient for any type of visit.

4.0 Further Social Service policies will be found in the Ward Reference Manual.

REHABILITATION THERAPY

REHAB. is basically any purposeful activity that modifies or changes behavior. REHAB. is the treatment of the patient through activity.

1.0 Under the general direction of the Assistant Superintendent of Medical Services, the Supervisor of Rehab. Services directs and is responsible for the operations of the department as a member of the hospital's treatment plan.

A. The services in the department are available to every patient in the hospital.

B. The primary goal is to provide activity that will enable and assist the patient in leaving the hospital.

C. The secondary goal is to provide activity that will prevent deterioration and regression.

D. The implementation of the two goals may be through therapists, volunteers, ward personnel, in cooperation with the ward team.

SCOPE: The Rehab. Service Department will help maintain, through activity, what is normal in the patient, provide meaningful experiences that will contribute to personality development and help the patient adjust to new experiences that will aid in his progress as an individual whether in the community or hospital.

Music, recreation, craft, industrial arts and bibliotherapy services through the media of therapists, volunteers and ward personnel are offered to achieve these goals.

For further information on Rehabilitation activities please refer to Ward Reference Manual.

PHYSICAL THERAPY

1.0 Ordering of Physical Therapy Treatments

For any patient needing treatments at the Physical Therapy Department in Chamberlain Hospital, the ward physician must write an order in the ward folder on the medical order sheet. It is the responsibility of the ward charge to telephone the Physical Therapist at Extension 284, or if no answer, call Extension 297, for an appointment. When the patient comes to Physical Therapy the one in charge should send the patient's chart with the patient.

2.0 Instructions in Use of Braces, Chairs and Other Equipment

The use of cerebral palsy equipment is directly under the supervision of our physical therapy department and it is the department's duty to instruct the personnel on the ward in the use of the various types of equipment. As regards any kind of orthopedic brace and any type of relaxing or posture chair, there must be a written order on the ward medical order sheet, signed by a physician, for the placing of a patient in such equipment. It will be the responsibility of the ward charge or a technician with special cerebral palsy training to carry out the physician's orders. Whenever a patient with a special orthopedic appliance is to be moved from one cottage to another, or a chair or other equipment that belongs to the State is to be exchanged, it will be necessary to notify the physical therapist, who will then handle the transfer of the equipment under the direction of the property clerk, according to the routine for the movement of equipment in this institution. The re-assignment of braces will be arranged by the physical therapist.

3.0 Instruction for Requisitions and Repair of Orthopedic Equipment

For the replacement, repair, fitting, special adjustment, or instruction in use of any braces, crutches, canes or special orthopedic appliances such as posture chairs and walkers, arrangements are made by calling the physical therapy department.

4.0 R. & T. Area; New Patients

On referral by the physician the services of the physical therapy department will be available for the adjustment and fitting of braces, chairs or other special orthopedic appliances.

5.0 Cerebral Palsy Clinic

On the last Wednesday of every month a cerebral palsy clinic is held under direction of Dr. Dorinson, a specialist in Physical Medicine and Rehabilitation. Patient referrals should be made by the physician through the Physical Therapy Department.

(8.0 continued)

E. Pin on diaper. Triangle, with padding.

F. Put on patient's gown.

9.0 Place sheet diagonally on bed, so about 18 inches extends above the head and below the feet. Place body in center of sheet.

10.0 Measure off three pieces of adhesive, long enough to go around wrist, and ankle. On each piece of adhesive tape write with ink the patient's name, case number, DATE OF DEATH, TIME OF DEATH AND NAME OF WARD.

A. Place one identification adhesive on the left wrist and one on the right ankle.

11.0 Tie wrists and ankles together with gauze. Not too tightly.

12.0 Place upper corner of sheet lightly over face, lower corner over feet, fold the sheet around the body. Using safety pins, pin sheet firmly along side of body. Be careful not to disfigure body.

13.1 Place the third adhesive identification strip across the chest on the sheet. For security, pin on with safety pin.

14.0 Make out nine death notices: 2 notices go with the body to the mortician, 7 notices are sent to the switchboard operator, who will distribute them as follows: (1) Superintendent,(2) Associate Superintendent, (3) Asst. Supt., Psych. or Med.,(4) Medical Records,(5) Switchboard,(6) Supt. of Nursing Service, (7) C.P. Project.

15.0 Make out one tag with name, number, ward and doctor to be placed on the proper refrigerator door by the person transporting the body to the morgue, after placing the body in the regrigerator.

16.0 When the body is ready to be taken to the Morgue, call C.N.O., ext. 219, for transportation between 7:00 a.m. and 3:00 p.m.. Between 3:00 p.m. and 7:00 a.m. call the switchboard operator for transportation.